

PO1000091044

Living in Health, Inc
- P.O. Box 365
Bonita Springs, FL 34133

none #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

- 1. _____ (Corporation Name) _____ (Document #) **900005082019--1**
- 2. _____ (Corporation Name) _____ (Document #) **-03/12/02--01008--002**
*******35.00 *****35.00**
- 3. _____ (Corporation Name) _____ (Document #)
- 4. _____ (Corporation Name) _____ (Document #)

- Walk in Pick up time Certified Copy
- Mail out Will wait Photocopy Certificate of Status

NEW FILINGS

- Profit
- Not for Profit
- Limited Liability
- Domestication
- Other

AMENDMENTS

- Amendment
- Resignation of R.A., Officer/Director
- Change of Registered Agent
- Dissolution/Withdrawal
- Merger

OTHER FILINGS

- Annual Report
- Fictitious Name

REGISTRATION/QUALIFICATION

- Foreign
- Limited Partnership
- Reinstatement
- Trademark
- Other

02 MAR 11 PM 2:27
SECRETARY OF STATE
ALABAMA, FLORIDA

FILED

PO1000091044
28 RAEM CM
3-11-02

Examiner's Initials

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of FLORIDA submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation : Living In Health, Inc

2. The mailing address of the corporation : P O Box 365
Bonita Springs, FL. 34133

3. Date of incorporation/qualification: 9/17/01 Document number: PO1000091044

4. The name and address of the current registered agent and office:
Rose Fazzina
2150 Sebastian Ct.
ALVA, FL 33920

5. The name and address of the new registered agent (if changed) and/or registered office (if changed):
(P. O. Box Not Acceptable)
Rose Fazzina
903 OLEANDER ST
Lady Lake, FL. 32159

The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

Rose Fazzina
(Signature of officer, chairman or vice chairman of the board)

3/6/02
(Date)

Rose Fazzina President
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

Rose Fazzina
(Signature of Registered Agent)

3/6/02
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

***** FILING FEE: \$35.00 *****

FILED
02 MAR 11 PM 2:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA